

# NOTICE OF ORDER OF FILIATION

Mail with proper fee to: Vital Records Changes  
PO Box 30721  
Lansing MI 48909

<b>PARENT(S) INFORMATION - Parent(s) name and complete mailing address are needed to mail the new record. Please provide a phone number to contact if there are questions regarding the Order of Filiation.</b>	
Parent(s) Name	
Mailing Address	
City/State/Zip Code	
Phone	Area Code          Number

Name of Child at Birth (First)	(Middle)	(Last)	
Date of Birth (Month, Day, Year)	Place of Birth (City, Village, Township)	(County)	(State)
Name of Mother (First, Middle, Last)			
Mother's Name Before First Married	Social Security Number	Date of Birth	State of Birth (or Country if not USA)

The court has determined that the father of this child is:

Name of Father (First, Middle, Last)	Social Security Number	Date of Birth	State of Birth (or Country if not USA)
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The mother of this child has determined that the child shall be named (please designate full name of the child):

First	Middle	Last
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COURT INFORMATION	
County	
Docket Number	
Date Order Filed in Court	
Signature: _____	
Clerk of Court:	
Date:	

<b>PAYMENT - Recording a Notice of Order of Filiation requires no fee. If a new birth record is to be created, the fee is \$50.00 and includes one copy of the new birth record. Additional copies of the new record are available for \$16.00 each when ordered at the same time. Payment must be made by check or money order and made payable to the "State of Michigan." The new birth record will not be created until the fee has been paid.</b>		
Record Notice of Order of Filiation (Non-Refundable) Fee includes one (1) certified copy of the record	\$ 50.00	\$ 50.00
Additional certified copies of the record	\$ 16.00 Each	\$
<b>TOTAL ENCLOSED</b>		<b>\$</b>